

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90032 031 ***150.00

DOCUMENT # 272768

1. Entity Name
WESTCHESTER ARMS INC

Principal Place of Business
**1501 ARTHUR STREET
 HOLLYWOOD FL 33020
 US**

Mailing Address
**1501 ARTHUR STREET
 HOLLYWOOD FL 33020
 US**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1118728** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



1st MOORE CR2E034 (10/04)

6. Name and Address of Current Registered Agent
**ZANNELLI, DOMINICK
 1501 ARTHUR STREET
 APT #10
 HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent
 Name **FLORIO, MARK G.**
 Street Address (P.O. Box Number is N/A... acceptable)
1501 ARTHUR ST.,
 APT. #7
 City **HOLLYWOOD** FL Zip Code **33020**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **MARK FLORIO** DATE **03-21-2005**

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May-1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	ZANNELLI, DOMINICK	
STREET ADDRESS	1501 ARTHUR ST. APT. 9	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	P	<input type="checkbox"/> Delete
NAME	ZUCCATO, JOSEPH	
STREET ADDRESS	1501 ARTHUR STREET#10	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ZANNELLI, BRENDA	
STREET ADDRESS	1501 ARTHUR ST 9	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	VILLENEUVE, CLUADE	
STREET ADDRESS	1501 ARTHUR ST. APT. 1	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	BM	<input type="checkbox"/> Delete
NAME	WADSWORTH, FRANK	
STREET ADDRESS	1501 ARTHUR ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARK G. FLORIO	
STREET ADDRESS	1501 ARTHUR ST., APT.#7	
CITY-ST-ZIP	HOLLYWOOD, FLORIDA 33020	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOSEPH ZUCCATO	
STREET ADDRESS	29721 PECKFORD ST.	
CITY-ST-ZIP	LIVONIA, MICHIGAN 48152	
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANSELMO, TONI	
STREET ADDRESS	4 BRIDGET WAY	
CITY-ST-ZIP	ATTLEBORO, MA. 02703	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GLYDEN HERNANDEZ	
STREET ADDRESS	3022 ATLANTIC ST.	
CITY-ST-ZIP	FRANKLIN PARK, ILLINOIS 60131	
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANKLIN F. WADSWORTH	
STREET ADDRESS	10666 SILVER LAKE ROAD	
CITY-ST-ZIP	SOUTH LYON, MICHIGAN 48178	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEAN A. WADSWORTH	
STREET ADDRESS	10666 SILVER LAKE ROAD	
CITY-ST-ZIP	SOUTH LYON, MICHIGAN 48178	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerment.

SIGNATURE: *[Signature]* **FRANKLIN F. WADSWORTH** DATE **3/21/05** (248) 437-0308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR